## Best Available Copy

PATENT	APPLI(	CATIO	DN	FEE	DE	TEF	RMINATION	RECORD
				_ ·		4	0004	

Effective October 1, 2001

Application or Docket Number	ŕ
10056393	
4 23 30 8 14 044	

(Column 1) (Column 2)							SMALL ENTITY TYPE			OTHER THAN R SMALL ENTITY		
TOTAL CLAIMS		30		COMMISSION		_	RATE	FEE		RATE	FEE	
FOR				NUMBER EXTRA		-	ASIC FEE	370.00		BASIC FEE	740.00	
			NUMBER FILED				F		0.00	UH		
TOTAL CHARGEABLE CLAIMS			'S' min	us 20=	* 10			X\$ 9=		OR	X\$18=	120
INC	EPENDENT CL	AIMS	4 min	กุบร 3 =	* \			X42=		ОЯ	X84=	84
MULTIPLE DEPENDENT CLAIM PRESENT							+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2						TOTAL		OR	TOTAL	1044		
9 3 CLAIMS AS AMENDED - PART II					(Column 3)	SMALL ENTITY OR			OTHER THAN SMALL ENTITY			
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		PREVI	IEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	. 30	Minus	** 5	30,	= 4		X\$ 9=		OR	X\$18=	
A ME	Independent	• 4	Minus			=-		X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=.		OR	+280=	)	
							AC	TOTAL DIT. FEE		OR	TOTAL ADDIT, FEE	0
		(Column 1)		(Colu	mn 2)	(Column 3)						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Ş	Total	•	Minus	**		-		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		P		X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-				.000		
							L	+140= TOTAL		OR	+280= TOTAL	
							AC	DOIT. FEE		OR	ADDIT. FEE	
_		(Column 1)			mn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N N N	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent		Minus	***	~ ~	= -		X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	T CLAIM			140			.000	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								OR	+280=			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												